Disposition of Unspent Contributions

Reporting Form for Elected Public Officers (NRS 294A.180)

State of Nevada

BEFORE COMPLETING THIS FORM, PLEASE READ THE REQUIREMENTS ON PAGE TWO

(This page may be copied or duplicated if additional space is needed, but all pages must be attached when the report is filed.)

NOTE: Any person who willfully violates the filing requirements is subject to a civil penalty of not more than \$5,000 for each violation and payment of court costs and attorney's fees!

Mike McGinness	Senate	Central Nevada
Name (print)	Office Held	District
DATE OF THIS REPORT:	☑ January 15, 2000	☐ 15th day of the second month after leaving office if contributions remain
BEGINNING BALANCE OF UP	NSPENT CAMPAIGN	rearing office if contributions remain
CONTRIBUTION	S AS OF JANUARY 15, 19	99: \$_ _{10,958,31}
3	EVDY AND STORY OF THE	,
EXPLANATION OF DISPOSITION (This report should reflect only any remaining campaign contributions from the previous election cycle		
1		ontributions from the previous election cycle.
AMOUNT:	DISPOSITION:	
S 1426.51	Donations to tax-exem	pt non-profit entities
\$ 7784.50	Expenses related to p	whlie office
S	hapenses letated to p	dbire ollice
\$		
S		
\$		
\$		
DEMAINING DALANCE OF UNCERNIT GARDANCE		
REMAINING BALANCE OF UNSPENT CAMPAIGN CONTRIBUTIONS AS OF DECEMBER 31, 1999: \$ 1747.30		
5 5 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		
I do hereby swear (or affirm) under penalty of perjury that the assertions contained in this report are true		
this 18 day of	January	2000
, , , , , , , , , , , , , , , , , , ,	~	
Signed: 1/(8/2000 Date		Me forme
Mike McGinness		Signature of Public Officer
Name of Public Officer	Off	ice Use Only FILED
770 Wildes Road		IN THE OFFICE OF THE SECRETARY OF STATE OF THE
Street Address		STATE OF NEVADA
Mailing Address if Different		JAN 1 8 2000 A
City and State Zip C	ode	
Fallon, Nevada 89400 Daytime Telephone Number	5	
775-423-2243		

Total number of pages for this report _____